# NH EMERGENCY MEDICAL & TRAUMA SERVICES COORDINATING BOARD

#### APPROVED MINUTES OF MEETING

# **September 15, 2005**

**Members Present:** Joe Sabato (Chair), Steve Achilles (Vice Chair), Al Burbank, Dave

Dubey, Dave Duquette, David Hogan, Janet Houston, Donald E. Johnson, Doug Martin, Doug McVicar, Sue Prentiss, John Sutton,

Norman Yanofsky

**Members Absent:** Director Richard Mason, Eileen Bartlett, Diane Becker, Ken

Howe, Karen Lord, Joe Mastromarino, Shawn Mitchell, Jackie

Normile, Susan Reeves, Dianne Roberts

Guests: Donna York Clark, Jonathan Dubey, Steve Erickson

**Bureau Staff:** Vicki Blanchard, ALS Coordinator; Cindy Castagnino, Secretary

II, Kathy Doolan, Field Services Coordinator; Fred Von

Recklinghausen, Research Coordinator

#### I. CALL TO ORDER

<u>Item 1.</u> The meeting of the EMS & Trauma Services Coordinating Board was called to order by Joe Sabato on September 15, 2005, at the Richard M. Flynn Fire Academy in Concord, NH. Joe Sabato thanked the Bureau for lunch. It was noted that Michael Pepin from Concord Fire will replace Fred Heinrich as the representative from the Professional Fire Fighters of NH. A letter from the Board will be put together for Fred for all his contributions.

## II. ACCEPTANCE OF MINUTES

<u>Item 1.</u> July 21, 2005 Minutes: Motion was made by Steve Achilles to approve the minutes as written. Dave Dubey seconded the motion. It was passed unanimously.

#### III. DISCUSSION ITEMS

# **Item 1.** DHHS Representation to the CB

Joe Sabato took a minute to talk about the Health and Human Services' representation to the Coordinating Board. The letter from Commissioner Steven originally appointed Dr. Kassler who has left the state and is now working for the CDC at another site. Mary Ann Cooney, Director of Public Health will be the

representative, but she could not make the meeting today. Director Cooney has extensive experience with Public Health at a local level and will be a real asset to this Board.

# **Item 2.** EMSC Update

Janet Houston shared with the Board a copy of the new Performance Measures that each EMS for Children (EMSC) Project has been mandated to measure of the next three years by the Federal Government. Grant related activities will focus on the integration of EMSC into the state EMS System. Janet can no longer pick and choose what the Federal Government will fund, Congress now wants to show that their money is making a difference, and will work on the same thing as other states, with no latitude on how we spend the money. Grants will be judged on compliance with both the state and federal statutes and rules. NH is ahead in some areas, and behind in others. The Grant Request is due on November 2, 2005, and Janet would like the Board to provide a letter of support. The Grant Request came with step-by-step instructions on the methodology for reaching the goals requested. The board decided to support the grant and help.

# **Item 3.** NH EMS Medical Control Board Report

Dr. McVicar gave the NH EMS Medical Control Board Report. The main things were:

- ➤ Interfacility Transfer Exemption Training that's provided for Certified Emergency Nurses (CEN), MD, and PA's so that they can be counted as an EMS provider taking care of a patient alone in the back of an ambulance based on the language of SB 88 (last session)..
- ➤ **Prerequisites** the flagship prerequisite is the RSI. On RSI, we don't want to disrupt ongoing programs, so we're going to try and get these hospitals together with these programs, and if they all agree on a certain criteria, that will be good enough for our first try at this. In thinking of the process of these prerequisites, we'd like to start the process with a whole squad and not an individual that wants to do a program. That involves coordinating with medical control, meeting certain criteria, including quality assurance, and so forth.
- ➤ **Protocols** the dose of the anti- emetic, Kytril, from .01 to 1.0 milligrams and for sucking chest wounds, we took out the non-petroleum specifications out of the Chest Wound Dressing.
- ➤ Statewide Protocols & ACEP discussion regarding that not everyone in NH who's involved in Medical Resources and Medical Control for EMS is fully aware of what protocols are and that as of January 1<sup>st</sup>, there will be a statewide protocols. A joint meeting with NH ACEP continues to be in the works and possible agenda items were discussed.
- > Trauma System John Sutton stated that we are continuing with the update and rectification of hospitals that were participating in the Trauma System. We have found that some of the guiding principles and regulations that we established ten years ago, are now exceedingly difficult to meet. The Trauma

Medical Review Committee is working to address this. The annual trauma conference meeting is on November 30, 2005. It is going to concentrate on Trauma Team Activity, and Building Trauma Teams and how to use Trauma Teams in your hospital setting.

## **Item 4. NHBEMS Report**

Sue Prentiss gave the Bureau report, referring to the written report in each member's folders.

On EMS staff and community news, Sue gave an update on her brother, Philip, who was evacuated out of his New Orleans home by hurricane Katrina, and thanked the EMS staff for their contributions to his plight.

Liza Burrill is the EMS representative at the National Association of State EMS Training Coordinators in San Antonio, Texas. Sue will be representing NH at the National Association of State EMS Directors in Orlando, Florida from October 11-14, 2005.

TEMSIS is very busy. Regions 3, 4 and 1 underway. There is more training in Region 1 in September and October. Region 3 and 4 has significant coordination between EMS Hospital Coordinators and Instructors., and computer-printer packages are being distributed. We are working with MA hospitals on a time line of PCR's, and access to our providers to put them online. Refusals still need to be completed and we have established a "help desk" number, 1-888-4-TEMSIS.

Sue passed out a summary of the educational transition program that's been developed by Jackie Stocking for the Interfacility Transfer Exception Transition Program. Many revisions were made, and a pilot course will be held on October 7, 2005. It is approximately 8 classroom hours and two hours of "hands on" skills and for testing. There was some discussion on liability and weather issues.

The tenth annual EMS Awards are underway. The Awards Committee met and the 2005 Awards recipients were announced.

On the Trauma System and Preparedness issues, Dr. Sutton already talked about some of the committee related issues. MCI programs have been well received, but not large numbers of attendees. The updates have been completed. We are going to recruit people to teach updated fall classes. The Mark One kits have arrived. They will be distributed soon along with a copy of the protocols and the training program.

Computer Based Testing (CBT) town meeting on September 7, we now have four sites to go online in NH in Concord, Keene, Intervale and Littleton. We will now survey EMS Units and bring results to the Board in November. Joe Sabato talked briefly on his trip to the National Registry, and saw how the tests were thought out from beginning to end.

Sue reported that we had a save with the rural AED project in Plymouth at the Plymouth family practice. Way to go! We have 643 AED's placed 91 orientations Conducted with 540 participants.

The EMS Management Workshops have held two, and there is one more to go. The "Personnel Accountability & Supervision for EMS Leaders" workshop will be held on September 21 at the NHFA in Concord. These have been well attended.

The North Country EMS Conference is coming up in October, from the 13<sup>th</sup> – 16<sup>th</sup>, 2005 at the Grand Summit Hotel in Bartlett, NH. Several Bureau staff will be presenters and provide support to the effort.

Every week we have a core group of staff members working on Administrative Rules, related to HB 257 specifically. We will have a draft set prepared and emailed by November for our review, so we can dialogue and start to work on them at our November meeting.

Instructor class for interested participants, there will be a field program for the Fire and Emergency Field Instructor III coming up after January. It's going to be in Manchester at the EMS Institute. As soon as the dates are firm, we will advertise. It will be a regular general admission process through the NHFA. This will be offered to anybody with a licensed EMS unit or a municipal fire service.

Not drafted yet as legislation, but there is of working with DHHS on RSA 141 section F privacy issue as it relates to consent for blood drawing. A concern is when a service provider gets an blood-borne exposure in the field, and the patient either can't, or refuses to give consent for a blood test, the provider and EMS Unit has to take a prophylaxis long term and undergo a process that is expensive and potentially unnecessary. This issue has been raised by the NH Fire Chief's Legislative subcommittee.

#### **Item 5. Best Practice Update**

We need the specific members of the committee. Please submit the names to Joe Sabato by the end of this week, along with contact information by the end of this week.

#### **Item 6. Scope of Practice**

We surveyed other states to find out, outside of the Department of Transportation (DOT) curriculum, what they did and how did it was covered, and we also tried to get some kind of legal advice or opinion from council at the Department of Safety as to where we stand when we're looking at tactical paramedics, or vaccination. Joe Sabato and Sue Prentiss framed the question. In terms of states, only 13 states replied. Of those 13, only 3 had specialty schedules that they take responsibility for and they have physician direction on tactical paramedics. 2 of the 3 dealt

directly with vaccinations. They (the state itself) take ownership for the training and the QM.

### **Item 7.** State of Disaster Preparedness/Hurricane Katrina

Last week the Legislative Oversight Committee, that is responsible for looking at Emergency Preparedness in this state had 3 hours of testimony regarding how NH stands up in the background of what's going on in the south. Director Cheney spoke on how there has been a lack of common sense with a lot of the Federal Planning. Preparing hasn't taken the all hazard approach, it has mainly been a terrorism approach. There has only been one bio-terrorist incident, and 999 natural disasters. There needs to be more of a balance. Kudos to the NH Red Cross for their help with evacuees to NH. We have looked at new housing issues as far as EMS support for sheltering. There is a lack of focus on EMS grant money. There was discussion on the lack of communication during the Katrina disaster, and how we are prepared should our current communications are set up for disaster. It was suggested we might get a communications update to see where we are. Since we are under ESF-8, the board decided it may be useful to invite Steve Tomajczyk to our next meeting to give us an overview on the state's new ESF-8 plan.

# **Item 8.** Update on Ambulance Diversion

Joe Sabato spent time with the Hospital Diversion Oversight Committee. The draft goals of this committee are to share Best Practices, look at diversion practices, review diversion data from E-911, assist with training, and enhance communications between hospitals. One third of the hospitals in the state, and some have opted out. The goal is having a statewide system of criteria and communications that would apply to all facilities and take into account the issues related to the Critical Access Hospitals. Diversion is really a hospital and healthcare system related issue, that can effect EMS. If this committee is successful, it would eliminate diversion, because diversion is merely a symptom of the problem. We will keep folks posted and up to date with this, and get Bill Wood's perspective, also, as he was there representing the Bureau.

#### **Item 9. Items of Interest**

All of the mobile radios are in, and are being installed. If you haven't gotten yours installed, you can talk to Sue, or call Motorola directly. The goal of interoperability is being met. There have been installation issues, but no issues of working issues. If there have been any, they have not gotten back to Chief Prentiss. They have field-tested the portables and it will be months before a purchase is finalized.

The draft of the rules will be done the first week of November. November 4, 2005 they will be e-mailed out, and we will have the bulk of the meeting dedicated to them. Joe Sabato and Doug McVicar will be the initial screeners prior to the meeting, so each board will be working together to coordinate, along

with Sue Prentiss and Kathy Doolan. When we file them they will go through the process and as always be available to the public.

NH Public Health Association Fall Forum is on the Heart of Public Health. One of the big things that will be talked about is AED's, and their role from a public health stand point on October 20<sup>th</sup> at Waterville Valley.

The Safe Driving Summit, sponsored by the Highway Safety Agency will have a Responder Safety component. The biggest risk for people at a responder level is driving a vehicle either going to a scene or in a vehicle transporting someone, as well as the scene itself. It is October 27, 2005, and the food is free. The Summit is being held in Merrimack, at the Merrimack Hotel and Conference Center at exit 11.

Dave Duquette explained some about the construction going on in the parking lot. He also explained how they are going to reroute some of the traffic to come out of the property, and who was going to move in the new buildings.

#### IV. ADJOURNMENT

**Motion** was made by Steve Achilles and seconded by Dave Dubey to adjourn. Unanimous agreement adjourned at 14:54.

#### V. NEXT MEETING

November 17, 2005 NH Fire Academy – Concord, NH 1:00 – 3:30

Respectfully Submitted,

Suzanne M. Prentiss, Bureau Chief, EMS

(Prepared by Cindy Castagnino, Secretary II)